



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIB DATA SHEET

CONFIRMATION NO. 8322

| SERIAL NUMBER | FILING or 371(c) DATE | CLASS | GROUP ART UNIT | ATTORNEY DOCKET NO. |
|---------------|--------------------------|-------|----------------|------------------------|
| 10/585,166 | 05/06/2009 | 256 | 3679 | COBR-11093 |
| RULE | | | | |

APPLICANTS
 Micheal V. Pavlov, Bloomington, NY;

**** CONTINUING DATA *******
 This application is a 371 of PCT/US05/25658 07/19/2005
 which claims benefit of 60/589,668 07/19/2004
 and is a CON of 10/959,531 10/05/2004 PAT 7,419,139
 which claims benefit of 60/589,668 07/19/2004
 and said PCT/US05/25658 07/19/2005
 is a CON of 10/959,530 10/05/2004 PAT 7,290,756
 which claims benefit of 60/589,668 07/19/2004
 and said PCT/US05/25658 07/19/2005
 is a CON of 10/959,944 10/05/2004 PAT 7,353,576
 which claims benefit of 60/589,668 07/19/2004

**** FOREIGN APPLICATIONS *******

**** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ****
 05/10/2009

| | | | | | |
|--|--|-------------------------|------------------------|---------------------|---------------------------|
| Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | <input type="checkbox"/> Met after Allowance | STATE OR COUNTRY | SHEETS DRAWINGS | TOTAL CLAIMS | INDEPENDENT CLAIMS |
| 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | NY | 21 | 5 4 | 1 |
| Verified and /JOSHUA T KENNEDY/ Acknowledged Examiner's Signature | Initials | | | | |

ADDRESS
 SCHMEISER OLSEN & WATTS
 18 E UNIVERSITY DRIVE
 SUITE # 101
 MESA, AZ 85201

TITLE
 System and methods for forming barbed tape product with predetermined patterns of attachment points including patterns for concertina tape products configured for....

| | | |
|-----------------------------------|---|--|
| FILING FEE RECEIVED 365 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees |
| | | <input type="checkbox"/> 1.16 Fees (Filing) |
| | | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |
| | | <input type="checkbox"/> 1.18 Fees (Issue) |
| | | <input type="checkbox"/> Other _____ |
| | | <input type="checkbox"/> Credit |